

**BOARD OF PSYCHOLOGY**

1422 HOWE AVENUE, SUITE 22
SACRAMENTO, CA 95825-3200
(916) 263-2699
www.psychboard.ca.gov

**LICENSE REACTIVATION APPLICATION**

NAME: _____

LICENSE NUMBER: **PSY** _____ EXPIRATION DATE: _____

Amount due to reactivate: \$ _____ if reactivated in _____.

(Fee due equals \$16.67 for each month, or portion of any month, remaining in the license cycle, e.g. 4 months x \$16.67 = \$66.68.)

CONVICTIONS: Since you last renewed your license, have you been convicted of or pled nolo contendere to any violation of any law of any state, the United States, or foreign country? You must disclose all misdemeanors and felonies (including but not limited to civil, welfare, health and safety, vehicle, or penal code convictions) and any conviction which has been dismissed.

* YES _____ NO _____

CONTINUING EDUCATION: I have completed _____ hours of approved continuing education within the preceding 24 months.

LAW & ETHICS REQUIREMENT: Have you completed a course of at least four hours in laws and ethics as required by Section 1397.61(b) of the California Code of Regulations within the preceding 24 months?

YES _____ NO _____

SPOUSAL/PARTNER ABUSE REQUIREMENT: Have you completed a course of at least one (1) hour in spousal or partner abuse assessment, detection and intervention strategies as required by Section 2915(d)(2) of the California Business and Professions Code within the preceding 24 months?

YES _____ NO _____

AGING AND LONG-TERM CARE REQUIREMENT: Have you completed a course of at least three (3) hours in the biological, social and psychological aspects of aging and long-term care as required by Section 2915.7 of the California Business and Professions Code within the preceding 24 months.

YES _____ NO _____

I DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT.

SIGNATURE _____ DATE _____

*If you answer yes to the conviction question, please send certified copies of the court records to the address above.

Return this letter to the address above as soon as possible, along with the required reactivation fees. Upon receipt and review of the above information, your reactivation application will be processed (processing can take 2 - 3 weeks before you receive your new license). If you have any questions, please call (916) 263-4777. Thank you.